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# PREDICTORS OF PSYCHOLOGICAL WELL-BEING AMONG ADOLESCENTS: THE ROLES OF PEER ACCEPTANCE, SELF-ESTEEM, PROSOCIAL BEHAVIOR, AND EMOTION REGULATION

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## ABSTRACT

*One of the most important markers and key indicators of positive mental health is psychological well-being, which includes self-acceptance, positive relationships, and personal growth. Adolescence is a critical and crucial developmental stage marked by significant increase to a person's physical, emotional, social, and cognitive changes, making individuals more vulnerable to mental health problems. Globally, one out of seven adolescents experience a mental disorder, and in Padang City nearly half of adolescents have been reported to have poor mental health, highlighting the need to identify factors influencing psychological well-being. This study examined the predictive roles of peer acceptance, self-esteem, prosocial behaviour, and emotion regulation in adolescents' psychological well-being. Using a quantitative cross-sectional design, data were collected from 504 adolescents aged 14–17 years through five standardized instruments measuring the study variables. Data analysis using descriptive, bivariate, and multivariate logistic regression showed significant relationships between psychological well-being and all predictors ( $p \leq .05$ ). Among these factors, self-esteem emerged as the strongest predictor. Together, peer acceptance, self-esteem, prosocial behaviour, and emotion regulation explained 35.5% of the variance in psychological well-being. The findings emphasize the importance of self-esteem and social factors and suggest that school-based interventions focusing on strengthening self-esteem and social connectedness may enhance adolescents' mental health resilience.*

**KEYWORDS:** Psychological Well-Being, Self-Esteem, Peer Acceptance, Prosocial Behavior, Emotion Regulation.

## 1. INTRODUCTION

Adolescence is a crucial developmental stage that occurs between childhood and adulthood, characterized by rapid and dynamic physical, emotional, social, and cognitive changes (Vankerckhoven et al., 2023). This period generally occurs between the ages of 10 and 19 and is often accompanied by hormonal changes that affect adolescents' moods, behaviour, and ability to adapt. During this phase, individuals begin to explore their identity, form more complex interpersonal relationships, and establish their life direction and goals. According to the World Health Organization's report (2025), one in seven adolescents worldwide experiences mental disorders, accounting for approximately 13% of the total global disease burden in this age group. This condition is also evident in Indonesia, where a study conducted by Yulia et al. (2024) shows that approximately 43.9% of adolescents in Padang City have poor mental health. These findings underscore the importance of paying attention to the factors that play a role in improving the psychological well-being of adolescents.

Adolescence is viewed as a complex developmental phase that can be divided into three stages, namely early adolescence (10–13 years), middle adolescence (14–16 years), and late adolescence (17–21 years) (Sarwono, 2000). Each stage has its own characteristics and challenges, marked by biological, cognitive, and social changes that can affect the formation of self-identity and psychological well-being (Erikson, 1968; Ryff, 1989). During this period, adolescents face strong emotional urges, the need for social acceptance, and the search for self-meaning. The ability to balance personal needs with social demands is an important aspect of achieving optimal psychological well-being (Santrock, 2018). Thus, adolescents need the ability to balance their personal and social needs in order to play a central role in achieving optimal psychological well-being.

*Psychological well-being* does not only reflect the absence of mental disorders, but also indicates a positive, adaptive, and optimally functioning mental state (Ryff & Keyes, 1995). According to Ryff & Keyes (1995), psychological well-being consists of six main dimensions: self-acceptance, positive relationships with others, autonomy, environmental mastery, life purpose, and personal growth. Individuals with high levels of psychological well-being generally feel happier, more satisfied with life, and have better abilities to manage stress and build healthy social relationships (Mami & Suharman, 2015 ; Supriyadi et al., 2020).

Various studies indicate that adolescents' psychological well-being is influenced by several psychosocial factors, including peer acceptance, self-esteem, prosocial behaviour, and emotional regulation. Peer acceptance plays an important role in adolescent social development, as it provides a sense of belonging, emotional support, and strengthens self-esteem (Sarkova et al., 2014; Bianchi et al., 2021). *Self-esteem* has been proven to be a primary predictor of psychological well-being and acts as a protective factor against the emergence of depressive symptoms and other emotional disorders (Freire & Tavares, 2011 ; Enwere & Iloakasia, 2024) . Additionally, prosocial behaviour involving helping others can foster a sense of meaning and enhance life satisfaction (Jin, 2008; Cahyani, 2021). Meanwhile, emotional regulation, particularly *cognitive reappraisal* strategies, plays a role in helping individuals interpret emotional experiences adaptively and maintain psychological balance (Gross & John, 2003; Nur et al., 2025).

Although a number of previous studies have discussed the relationship between these factors and adolescent psychological well-being, most still focus on analysing partial relationships between variables. A comprehensive understanding of the simultaneous contribution of peer acceptance, *self-esteem*, prosocial behaviour, and emotional regulation to psychological well-being is still limited, especially in the context of Indonesian adolescents. Therefore, this study aims to fill this gap by simultaneously analysing the roles of these four factors in predicting the psychological well-being of adolescents in Padang City. The findings of this study are expected to provide empirical contributions to the development of intervention programs focused on improving *psychological well-being* and social connectedness as strategies to strengthen adolescent mental health.

## 2. METHOD

### 2.1. Research Design

This study uses a quantitative approach with a cross-sectional *design*. This design was chosen to analyse the relationship between adolescent psychological well-being and a number of predictor variables, namely *peer acceptance*, self-esteem, prosocial behaviour, and emotion regulation. Data collection was conducted using a standardized questionnaire that has been widely used in developmental psychology and adolescent mental health research. This design allows researchers to obtain an objective and measurable picture of the relationship between variables.

## 2.2. Sample

The study population included all adolescents residing in Padang City, West Sumatra. The sampling technique used was *purposive sampling* with the following inclusion criteria: (1) adolescents aged 14–17 years, (2) residing in Padang City, and (3) willing to participate by signing an *informed consent*

form. Exclusion criteria included (1) participants who did not complete the questionnaire in full, (2) refused to give consent, and (3) did not meet the specified age range.

Based on these criteria, a total of 504 respondents were eligible for analysis. The demographic characteristics of the participants are presented in Table 1.

**Table 1: Demographic Characteristics of Respondents.**

No	Factor	Number of Respondents	Percentage
<b>Gender</b>			
1.	Male	234	46.43
2.	Female	270	53.57
	<b>Total</b>	504	100
<b>Age</b>			
1.	14 - 15 years old	406	80.56
2.	16–17 years old	98	19.44
	<b>Total</b>	504	100
<b>Chronic Disease History</b>			
1.	Has a history of chronic disease	23	4.56
2.	No history of chronic disease	481	95.44
	<b>Total</b>	504	100
<b>Parent's Income (Father) per Month</b>			
1.	USD < 119.92 (Low)	352	69.84
2.	USD 119.92 - 239.84 (Medium)	116	23.02
3.	USD 239.84 - 359.76 (High)	17	3.37
4.	USD >359.76 (Very High)	19	3.77
	<b>Total</b>	504	100
<b>Parent's Income (Mother) per Month</b>			
1.	USD < 119.92 (Low)	446	88.49
2.	USD 119.92 - 239.84 (Medium)	40	7.93
3.	USD 239.84 - 359.76 (High)	9	1.79
4.	USD >359.76 (Very High)	9	1.79
	<b>Total</b>	504	100
<b>Family Size</b>			
1.	Up to 3 Members	221	43.85
2.	4 - 5 Members	234	46.43
3.	6 and above Members	49	9.72
	<b>Total</b>	504	100
<b>Number of Close Friends</b>			
1.	1 - 2 close friends	11	2.18
2.	3 - 5 close friends	4	0.79
3.	> 5 close friends	489	97.02
	<b>Total</b>	504	100
<b>Intensity of activities with friends in a week</b>			
1.	Rarely (0-1 times)	102	20.24
2.	Sometimes (2-3 times)	205	40.67
3.	Frequently (>3 times)	197	39.09
	<b>Total</b>	504	100
<b>Participates in Extracurricular Activities/School Organizations</b>			
1.	Yes	384	76.19
2.	No	120	23.81
	<b>Total</b>	504	100

Table 1 shows the demographic characteristics of the 504 participants in this study. Based on gender, most respondents were female (53.57%), while males accounted for 46.43%. Most participants were in the 14–15 age group (80.56%), indicating that the respondents were predominantly adolescents in the early middle phase, which is an important period in

social and emotional development. Almost all respondents (95.44%) had no history of chronic illness, indicating that they were in relatively good physical health to support psychological well-being.

From a socioeconomic perspective, most parents had low incomes, both fathers (69.84%) and mothers (88.49%), indicating a modest family economic

background. This condition provides an important context for understanding the psychosocial factors that influence adolescent psychological well-being, given that economic constraints often impact access to social support and opportunities for self-development.

Most respondents lived in families of four to five members (46.43%), and almost all adolescents (97.02%) reported having more than five close friends. These findings reflect the importance of strong peer social networks in the lives of adolescents in a collectivist context such as Indonesia. In addition, 76.19% of participants actively participated in extracurricular activities or school organizations, indicating that most adolescents have a high level of social involvement. This can be a protective factor that plays a role in improving psychological well-being through an increased sense of belonging, social acceptance, and positive self-esteem.

### 2.3. Instruments

This study used five psychological instruments

that have been tested for validity and reliability (Table 2). All instruments were adapted from standard measuring tools widely used in adolescent psychology research. Each instrument used a Likert scale with a range of responses that varied according to the estimated using Cronbach's Alpha coefficient,

which showed a high level of internal construct being measured. Reliability was consistency across all scales. The adaptation process was carried out through translation, readability testing, and limited field trials to ensure the suitability of the language and cultural context of the respondents in Indonesia.

The five instruments used in this study showed high reliability with Cronbach's Alpha values ranging from 0.809 to 0.910, indicating excellent internal consistency. All these measurement tools were selected because they have been widely used in cross-cultural psychology research, particularly in adolescent populations. The adaptation process was carried out while maintaining the original conceptual structure of each instrument, accompanied by adjustments to the terminology to suit the Indonesian language and cultural context.

**Table 2: Research Instruments.**

Variable	Developer	Number of Items	Aspect	Likert Scale	Sample Item	Cronbach's Alpha
Psychological Well-Being	Ryff (1989)	18	Autonomy, Environmental Mastery, Personal Growth, Positive Relations, Purpose in Life, Self-Acceptance	1-7 (Strongly Disagree – Strongly Agree)	"I rarely have warm and trusting relationships with others."	.809
Peer Acceptance	Parker and Asher (1993)	36	Validation and Caring, Conflict and Betrayal, Companionship and Recreation, Help and Guidance, Intimate Exchange, Conflict Resolution	1-5 (Strongly Disagree – Strongly Agree)	"My friends and I often spend time together during breaks."	.910
Self-Esteem	Revised by Hills, et al. (2011)	25	Successes, Values, Aspirations, Defense	1-4 (Strongly Disagree – Strongly Agree)	"My values have always been something to be proud of."	.825
Prosocial Behaviour	Modification refers to Carlo and Randall's (2002) theory	19	Public, Anonymous, Direct, Emotional, Compliant, Altruism	1-5 (Strongly Disagree – Strongly Agree)	"I am more enthusiastic about helping if there are people watching."	.895
Emotional Regulation	Gross and John (2003)	10	Cognitive Reappraisal, Expressive Suppression	1-4 (Strongly Disagree – Strongly Agree)	"If I want to feel happy, I try to think about pleasant things."	.849

### 3. RESEARCH PROCEDURE

Prior to data collection, the researchers obtained ethical approval from the Ethics Committee of the Faculty of Medicine, Andalas University (Number: 537/UN.16.2/KEP-FK/2025). The questionnaire was distributed online and offline through several secondary schools in Padang City. Participants who

met the inclusion criteria were first explained the objectives, procedures, benefits, and confidentiality rights of the research data. The

questionnaire was completed voluntarily after the participants gave their written consent (informed consent). Data collection took place over three weeks, and each participant needed approximately 20–25 minutes to complete the questionnaire. Incomplete

data or data that did not meet the exclusion criteria were excluded from the analysis.

All research procedures were carried out in accordance with the research ethics standards outlined in the 1964 *Declaration of Helsinki* and its latest amendments. Participation in this study was entirely voluntary, and the confidentiality of participants' identities was strictly maintained throughout the research process.

#### 4. DATA ANALYSIS

Data analysis was performed using IBM SPSS Statistics software version 25. Descriptive analysis was used to describe the demographic characteristics of the respondents and the distribution of scores for each research variable. Furthermore, bivariate analysis was performed to test the relationship

between psychological well-being and each predictor variable. Multivariate logistic regression analysis was used to determine the simultaneous contribution of peer acceptance, self-esteem, prosocial behaviour, and emotional regulation to psychological well-being. A  $p\text{-value} \leq .05$  was used as the statistical significance threshold.

#### 5. RESULT

Bivariate analysis was conducted to determine the relationship between independent variables (peer acceptance, self-esteem, prosocial behaviour, and emotional regulation) and dependent variables (psychological well-being of adolescents). The test used was the *Chi-square test* with a 95% confidence level ( $\alpha = .05$ ). The results of the analysis are presented in Table 3.

**Table 3: Relationship Between Determinant Factors and Psychological Well-Being of Adolescents in Padang City.**

Variable	Asy. Sig	p-value	Description
Psychological Well-Being with Peer Acceptance	.000	.296	Significant relationship with weak strength
Psychological Well-Being with Self-Esteem	.000	.452	Significant relationship with moderate strength
Psychological Well-Being with Prosocial	.000	.195	Significant relationship with weak strength
Psychological Well-Being with Emotional Regulation (Cognitive Reappraisal)	.000	.234	Significant relationship with weak strength
Psychological Well-Being with Emotional Regulation (Expressive Suppression)	.101	-	No significant relationship

The results in Table 3 show that four independent variables—*peer acceptance*, *self-esteem*, *prosocial behaviour*, and *cognitive reappraisal*—have a significant relationship with *psychological well-being* ( $p \leq .05$ ). Meanwhile, the *expressive suppression* emotion regulation strategy did not show a significant relationship ( $p > .05$ ). The correlation coefficient values show that *self-esteem* has the strongest relationship compared to other variables, followed by *peer acceptance*, *cognitive reappraisal*, and *prosocial*

*behaviour*.

Based on the criterion of Asymp. Sig  $< .25$ , the four significant independent variables (except *expressive suppression*) were included in the multivariate analysis stage. Further analysis was conducted using multinomial logistic regression to determine the relative and simultaneous contributions of all predictor variables to the psychological well-being of adolescents in Padang City.

**Table 4: Results Of the Coefficient of Determination Test.**

Test	R-Square
Nagelkerke	.355

The results of the coefficient of determination test show that the Nagelkerke  $R^2$  value is **0.355**, which means that the variables of *peer acceptance*, *self-esteem*, *prosocial behaviour*, and *emotion regulation* simultaneously explain 35.5% of the variance in adolescent psychological well-being. Meanwhile, the remaining 64.5% of the variance is explained by factors outside the research model. These

findings indicate that psychosocial factors and emotion regulation abilities play an important role in shaping psychological well-being, although there is still a significant influence from external variables such as family support, school environment conditions, or academic stress that are not included in this study.

**Table 5: Results Of the Chi-Square Test (Bivariate for Psychological Well-Being).**

No	Variable	Chi-Square	Sig
1	Peer Acceptance	14.348	.006

2.	Self-Esteem	73,364	.000
3.	Prosocial	10,361	.035
4.	Emotional Regulation (Cognitive Reappraisal)	12,527	.014
5.	Emotional Regulation (Expressive Suppression)	11,070	.026

The Chi-square test results show that all predictor variables have a significant relationship with adolescent psychological well-being ( $p < .05$ ). The highest Chi-square value was found in the variable "self-esteem" ( $\chi^2 = 73.364$ ,  $p < .001$ ), indicating that self-esteem is the most influential factor in explaining variations in psychological well-being. This confirms that a positive perception of oneself plays an

important role as a protective mechanism against stress and emotional disorders in adolescence. In addition, significant results on *peer acceptance* and *prosocial behaviour* show that social support and positive interpersonal relationships also contribute to the psychological well-being of adolescents in Padang City.

**Table 6: Results Of Multinomial Logistic Regression Modelling.**

Variable	p-value	Exp (B)	CI for EXP (B)	
			Lower	Upper
Peer Acceptance	.004	10.061	2,100	48,196
Self-Esteem	.000	152	3,788.2	6123
Prosocial	.666	1.461	.260	8,204
Emotional Regulation (Cognitive Reappraisal)	.996	451.7	.000	-
Emotional Regulation (Expressive Suppression)	.018	.159	.035	.731

The logistic regression model shows that the *self-esteem* variable is the most significant predictor of *psychological well-being* ( $p < .001$ , OR = 152.000). This means that adolescents with low self-esteem are approximately 152 times more likely to experience low psychological well-being than adolescents with high self-esteem. In addition, *peer acceptance* also shows a significant relationship with *psychological well-being* ( $p = 0.004$ , OR = 10.061), which means that social acceptance from peers plays an important role in improving psychological well-being.

Conversely, the variables of *prosocial behaviour* and *cognitive reappraisal* did not show a significant effect in the final model, even though both had a relationship at the bivariate stage. The variable of *expressive suppression* even showed a negative relationship with psychological well-being (OR = .159,  $p = .018$ ), indicating that individuals who tend to suppress their emotional expressions are more likely to experience low psychological well-being.

Overall, the results of this study indicate that *self-esteem* is the most dominant factor influencing the psychological well-being of adolescents in Padang City, followed by *peer acceptance*. These results confirm the important role of self-esteem in helping adolescents build positive perceptions of themselves and face developmental challenges more adaptively. Meanwhile, prosocial behaviour and emotion regulation strategies play a supporting role in strengthening adolescents' social and emotional functioning, although their influence is statistically weaker.

These findings are consistent with previous

studies (Freire & Tavares, 2011; Orth & Robins, 2014) showing that self-esteem contributes significantly to psychological well-being. Thus, increasing *self-esteem* and social acceptance among peers is key to promoting adolescent mental health.

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## 6. DISCUSSION

This study examined the roles of peer acceptance, self-esteem, prosocial behaviour, and emotion regulation in predicting adolescents' psychological well-being in Padang City. The findings indicate that all predictors are significantly associated with psychological well-being, collectively explaining 35.5% of its variance. Although a substantial proportion of variance remains unexplained, the results highlight the importance of psychosocial and emotional factors in shaping adolescents' well-being, supporting the view that psychological well-being is a multidimensional construct involving both intrapersonal and social dimensions (Poudel et al., 2020; Viejo et al., 2018).

Among all variables, self-esteem emerged as the strongest predictor, underscoring the central role of positive self-evaluation in adolescents' mental health and emotional adjustment. This finding is consistent with prior studies indicating that self-esteem serves as a protective factor against psychological distress

and contributes to life satisfaction and resilience (Orth *et al.*, 2014; Orth & Robins, 2014; Han *et al.*, 2025). Self-esteem may act as a buffer against stress and anxiety, especially within cultural contexts that emphasize social harmony.

In addition, the quality of self-esteem is an important consideration. As suggested by Paradise and Kernis (2002), the quality and stability of self-esteem are also critical, as secure self-esteem is associated with higher psychological well-being, whereas fragile self-esteem increases vulnerability to stress. Thus, psychological well-being is influenced not only by the level of self-esteem but also by its stability and depth.

The strong role of self-esteem in this study may be understood through several mechanisms. First, adolescence represents a critical stage of identity development, where self-esteem serves as a foundation for personal growth and direction (Viejo *et al.*, 2018). Second, higher self-esteem facilitates the development of positive social relationships and a sense of peer acceptance. Third, self-esteem contributes to more adaptive interpretations of negative experiences, thereby supporting emotion regulation and reducing psychological distress (Han *et al.*, 2025).

Consistent with findings in Southeast Asian context (Cahyani, 2021; Nur *et al.*, 2025), this study also highlights the importance of self-esteem and emotion regulation in adolescents' psychological well-being. In collectivist settings such as Indonesia, self-esteem may reflect not only individual evaluation but also the quality of social relationships and environmental support.

Peer acceptance was also found to significantly contribute to psychological well-being, highlighting the importance of social support and a sense of belonging during adolescence. Positive peer relationships can enhance emotional support, strengthen self-esteem, and promote social competence, while supportive school environments may reduce negative experiences (e.g., bullying) and improve students' engagement and overall well-being. In addition, prosocial behaviour demonstrated a positive, although smaller, contribution to psychological well-being. This finding is consistent with previous studies (Marbun & Setiawan, 2019; Cahyani, 2021), suggesting that helping behaviours foster a sense of meaning, empathy, and social connectedness, thereby supporting adolescents' moral development and overall well-being.

Regarding emotion regulation, cognitive reappraisal was positively associated with

psychological well-being, whereas expressive suppression showed a negative relationship. These findings are consistent with prior research (Hoh & Suranata, 2025; Febrianti & Syarifah, 2022; Putri & Mariyati, 2024), indicating that adaptive emotion regulation strategies enhance well-being, while maladaptive strategies may increase stress. These results also align with Ryff's (1989) model, particularly the dimensions of environmental mastery and self-acceptance.

Overall, the findings suggest that adolescents' psychological well-being is shaped by the interaction of internal factors, such as self-esteem and emotion regulation, and external factors, such as peer acceptance. Therefore, interventions should focus on strengthening self-esteem, fostering supportive peer relationships, and promoting adaptive emotion regulation strategies. School-based programs, such as peer support, group counselling, and socio-emotional learning, may serve as effective approaches to enhance adolescents' psychological well-being.

Finally, this study highlights that self-esteem not only acts as an individual predictor but may also function as a mechanism linking social experiences and psychological well-being. The findings contribute to the extension of Ryff's (1989) model by emphasizing the integration of intrapersonal and social factors within a collectivist cultural context. Empirically, this study provides contextual evidence from Indonesian adolescents and offers practical implications for the development of culturally relevant mental health interventions.

## 7. CONCLUSION

This study shows that *psychological well-being* among adolescents in Padang City is influenced by several psychosocial factors, particularly *self-esteem* and *peer acceptance*. The results of the analysis show that all predictor variables (peer acceptance, self-esteem, prosocial behaviour, and emotional regulation) are significantly related to psychological well-being, with a total contribution of 35.5%. Among all these factors, *self-esteem* proved to be the most dominant predictor and acted as a protector against a decline in psychological well-being.

These findings confirm that adolescent psychological well-being is the result of an interaction between internal factors (self-esteem, emotional regulation ability) and external factors (social support, peer acceptance). Adolescents with positive self-evaluation, who are accepted by their social environment, and who can manage their emotions adaptively, tend to have better

psychological well-being.

## 8. THEORETICAL AND PRACTICAL IMPLICATIONS

Theoretically, the results of this study reinforce the conceptual framework of psychological well-being proposed by Ryff (1989), that psychological well-being is the result of a complex interaction between intrapersonal and social factors. The finding that *self-esteem* is the most dominant predictor confirms its role as a psychological mechanism that bridges self-evaluation and social adaptation. In the context of adolescents, *self-esteem* functions not only as an evaluative aspect but also as a psychological resource that helps individuals interpret emotional experiences more adaptively and maintain mental stability amid social demands. In addition, the results of this study enrich cross-cultural literature by providing empirical evidence from an Asian context, particularly Indonesia, which emphasizes the importance of social relationships and group acceptance as key elements in the formation of emotional well-being. Thus, this study confirms that psychological well-being is not merely a reflection of individual factors, but also a product of interacting social systems.

From a practical perspective, these findings provide an empirical basis for the development of mental health promotion programs for adolescents in schools and communities. Efforts that can be made include training to strengthen *self-esteem* through group counselling and self-reflection activities, developing social skills and empathy through collaborative activities or *peer mentoring*, and training in adaptive emotion regulation such as *cognitive reappraisal* and *mindfulness training*. In addition, it is important for schools and policymakers to create a supportive and inclusive social climate, where adolescents feel psychologically safe and accepted without stigma. With integrated interventions

between personal strengthening and social support, the psychological well-being of adolescents can be improved sustainably, while supporting the achievement of Indonesia's youth mental health development goals.

## 9. LIMITATIONS AND RECOMMENDATIONS FOR FURTHER RESEARCH

This study has several limitations that should be acknowledged. First, the use of a cross-sectional design restricts the ability to establish causal relationships between peer acceptance, self-esteem, prosocial behaviour, emotion regulation, and psychological well-being, as all variables were measured at a single point in time. Therefore, the significant associations identified in this study should be interpreted with caution and not as evidence of causal effects. Future research employing longitudinal designs is strongly recommended to better capture temporal dynamics and to provide more robust evidence regarding the directional relationships among these variables.

Second, although this study highlights the important roles of psychosocial and emotional factors, particularly self-esteem as the strongest predictor, the scope of variables remains limited and does not fully account for broader contextual influences. Factors such as family environment, parenting styles, academic pressure, and cultural context may also play a critical role in shaping adolescents' psychological well-being, especially within the Indonesian setting.

Future studies are encouraged to use longitudinal of mixed methods approaches and include broader contextual variables. This would provide a more comprehensive understanding of adolescents' psychological well-being and support the development of more targeted and culturally appropriate interventions.

**Conflict Of Interest:** The authors declare that there is no conflict of interest, whether financial or non-financial, in the conduct or publication of this research

**Author Contributions:** All authors engaged in conceptualization, data analysis, validation, data interpretation, writing, and editing the manuscript. Writing roles were proportionally distributed based on author order.

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